

HUMAN SERVICES DEPARTMENT[441]**Adopted and Filed Emergency After Notice**

Pursuant to the authority of Iowa Code section 249A.4, the Department of Human Services amends Chapter 75, “Conditions of Eligibility,” Iowa Administrative Code.

The purpose of this amendment is to update administrative rules for the average charges for psychiatric medical institutions for children (PMICs) and mental health institutions (MHIs) and the maximum Medicaid rate for intermediate care facilities for individuals with intellectual disabilities (ICF/IDs), which are used to determine the disposition of the income of a medical assistance income trust (MAIT).

The average charges for PMICs and MHIs are based on Medicaid rates because Medicaid is the primary payer of these services. The Iowa Department of Human Services provided the maximum charge for care in an ICF/ID.

- The average charge for care in a PMIC increased from \$5,472 per month to \$6,111 per month.
- The average charge for care in an MHI increased from \$18,546 per month to \$19,590 per month.
- The maximum Medicaid rate for ICF/ID increased from \$23,801 per month to \$25,922 per month.

The increases in these amounts will allow a few additional individuals to qualify for medical assistance with MAITs because the rule making increases the income limit at which all income assigned to a MAIT is considered to be available for Medicaid eligibility purposes.

Notice of Intended Action on this amendment was published in the Iowa Administrative Bulletin as **ARC 0690C** on April 17, 2013. The Department received no comments from the public concerning the Notice. This amendment is identical to the one published under Notice of Intended Action.

The Council on Human Services adopted this amendment on June 12, 2013.

Pursuant to Iowa Code section 17A.5(2)“b”(2), the Department finds that the normal effective date of this amendment, 35 days after publication, should be waived and the amendment made effective July 1, 2013. The normal effective date can be waived since the amendment confers a benefit on the public. Specifically, the average costs and maximum Medicaid rate are increased, thereby allowing additional individuals to qualify for medical assistance with a medical assistance income trust (MAIT).

These rules do not contain waiver provisions because they confer a benefit. Everyone should be subject to the same amounts set by this rule making. Individuals may request an exception pursuant to the Department’s general rule on exceptions to policy at 441—1.8(17A,217).

After analysis and review of this rule making, no impact on jobs has been found.

This amendment is intended to implement Iowa Code section 249A.4.

This amendment became effective July 1, 2013.

The following amendment is adopted.

Amend paragraph **75.24(3)“b”** as follows:

b. A trust established for the benefit of an individual if the trust is composed only of pension, social security, and other income to the individual (and accumulated income of the trust), and the state will receive all amounts remaining in the trust upon the death of the individual up to the amount equal to the total medical assistance paid on behalf of the individual. For disposition of trust amounts pursuant to Iowa Code sections 633C.1 to 633C.5, the average statewide charges and Medicaid rates for the period from July 1, ~~2012~~ 2013, to June 30, ~~2013~~ 2014, shall be as follows:

- (1) No change.
- (2) The maximum statewide Medicaid rate for a resident of an intermediate care facility for persons with an intellectual disability is ~~\$23,801~~ \$25,922 per month.
- (3) The average statewide charge to a resident of a mental health institute is ~~\$18,546~~ \$19,590 per month.
- (4) The average statewide charge to a private-pay resident of a psychiatric medical institution for children is ~~\$5,472~~ \$6,111 per month.

(5) No change.

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EDITOR'S NOTE: For replacement pages for IAC, see IAC Supplement 7/10/13.